

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212512330				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: HENKEL CORPORATION</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street RICHMOND, VA 23219</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 4/30/2012</p> <p>SCC ID NO: F0610701</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>2,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	2,000,000
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COMMON	2,000,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: ONE HENKEL WAY</p> <p style="margin-left: 40px;">CITY/ST/ZIP: ROCKY HILL, CT 06067</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JEFFREY C PICCOLOMINI TITLE: PRES/CFO/DIR ADDRESS: ONE HENKEL WAY CITY/ST/ZIP/CO: ROCKY HILL, CT 06067 </td> <td style="width: 50%; vertical-align: top; text-align: right;"> <input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JEFFREY C PICCOLOMINI TITLE: PRES/CFO/DIR ADDRESS: ONE HENKEL WAY CITY/ST/ZIP/CO: ROCKY HILL, CT 06067	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
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NAME:	BRAD GAZAWAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & ASST. SECY		
ADDRESS:	19001 N. Scottsdale Road		
CITY/ST/ZIP/CO:	Scottsdale, AZ 85255		
NAME:	JOHN PREYSNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP & ASST. SECY		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	PAUL R BERRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/CLO/SEC		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	AMY SPAN-WERGELES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	SEAN LARMON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	MICHAEL BIONDOLILLO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, HR		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
NAME:	JAN-DIRK AURIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	HENKELSTRABE 67		
CITY/ST/ZIP/CO:	DUSSELDORF,,40589,GERMANY , , FN		
NAME:	JULIAN O COLQUITT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE HENKEL WAY		
CITY/ST/ZIP/CO:	ROCKY HILL, CT 06067		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GREGORY GAGLIONE	GREGORY GAGLIONE,	4/4/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			